

<i>SERFF Tracking Number:</i>	<i>PRUD-126396431</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>The Prudential Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>44179</i>
<i>Company Tracking Number:</i>	<i>IFSA-PICA-ARRM-JW</i>		
<i>TOI:</i>	<i>A10 Annuities - Other</i>	<i>Sub-TOI:</i>	<i>A10.000 Annuities - Other</i>
<i>Product Name:</i>	<i>AR Replacement Memorandum</i>		
<i>Project Name/Number:</i>	<i>AR Replacement Memorandum/AR Replacement Memorandum</i>		

## Filing at a Glance

Company: The Prudential Insurance Company of America

Product Name: AR Replacement Memorandum SERFF Tr Num: PRUD-126396431 State: Arkansas

TOI: A10 Annuities - Other SERFF Status: Closed-Approved- Closed State Tr Num: 44179

Sub-TOI: A10.000 Annuities - Other Co Tr Num: IFSA-PICA-ARRM-JW State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Authors: John Witteman, Anthony

Pereira, Carolyn Cargnel, Pamela

Bonaparte-Golding

Date Submitted: 11/24/2009

Disposition Date: 11/30/2009  
Disposition Status: Approved-Closed

Implementation Date Requested: 01/01/2010

Implementation Date:

State Filing Description:

## General Information

Project Name: AR Replacement Memorandum

Project Number: AR Replacement Memorandum

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 11/30/2009

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 11/30/2009

Created By: John Witteman

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: John Witteman

Filing Description:

VIA: SERFF

November 24, 2009

Honorable Jay Bradford, Insurance Commissioner

Life and Health Division

Arkansas Insurance Department

SERFF Tracking Number: PRUD-126396431 State: Arkansas  
Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179  
Company Tracking Number: IFSA-PICA-ARRM-JW  
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other  
Product Name: AR Replacement Memorandum  
Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

200 West Third Street  
Little Rock, AR 72201

Attn Claudia Meeks, Rates and Form Filings

Re: The Prudential Insurance Company of America ("PICA, we, us")  
NAIC No. 304-68241, FEIN No. 22-1211670

Forms Submitted for Approval:  
Replacement Memorandum Form, P-ARRM(1/10)

Dear Ms. Meeks:

PICA submits for your approval a Replacement Memorandum similar to the sample Memorandum contained in Department Rule 97 dated July 23, 2009. We would appreciate the Department's expedited review of the submitted form so that we may comply with the January 1, 2010 effective date of Rule 97.

Brackets have been placed around the contact information for the service center which is subject to change from time to time. We reserve the right to update the contact information without re-filing.

Please note that the identical form is being filed simultaneously on behalf of Pruco Life Insurance Company and The Prudential Insurance Company of America.

PICA believes that federal law exempts these forms from any "Flesch score" or readability requirements in your statutes or regulations. Unless otherwise informed, PICA reserves the right to alter the pagination, layout, including sequential order, color, and typeface of these forms. PICA confirms any such change will be in conformance with your State's filing requirements. Any filing materials PICA believes your Department requires are enclosed. Please contact the undersigned with any questions you may have.

Very truly yours,

John Witteman  
Contract Specialist  
Tel: (800) 628-6039, Ext. 21403  
E-mail: John.Witteman@Prudential.com  
Fax: (203) 944-7737  
Enclosures

SERFF Tracking Number: PRUD-126396431 State: Arkansas

Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179

Company Tracking Number: IFSA-PICA-ARRM-JW

TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other

Product Name: AR Replacement Memorandum

Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

## Company and Contact

### Filing Contact Information

Anthony Pereira, Senior Compliance Analyst Anthony.Pereira@Prudential.com  
 One Corporate Drive 800-628-6039 [Phone] 57146 [Ext]  
 P.O. Box 883 203-944-7510 [FAX]  
 Shelton, CT 06484

### Filing Company Information

The Prudential Insurance Company of America CoCode: 68241 State of Domicile: New Jersey  
 751 Broad Street Group Code: 304 Company Type: Life  
 Newark, NJ 07102-3777 Group Name: State ID Number:  
 (973) 802-6000 ext. [Phone] FEIN Number: 22-1211670

-----

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$20.00  
 Retaliatory? No  
 Fee Explanation: 1 form @ \$20.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Prudential Insurance Company of America	\$20.00	11/24/2009	32271306

SERFF Tracking Number: PRUD-126396431 State: Arkansas  
Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179  
Company Tracking Number: IFSA-PICA-ARRM-JW  
TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other  
Product Name: AR Replacement Memorandum  
Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	11/30/2009	11/30/2009

<i>SERFF Tracking Number:</i>	<i>PRUD-126396431</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>The Prudential Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>44179</i>
<i>Company Tracking Number:</i>	<i>IFSA-PICA-ARRM-JW</i>		
<i>TOI:</i>	<i>A10 Annuities - Other</i>	<i>Sub-TOI:</i>	<i>A10.000 Annuities - Other</i>
<i>Product Name:</i>	<i>AR Replacement Memorandum</i>		
<i>Project Name/Number:</i>	<i>AR Replacement Memorandum/AR Replacement Memorandum</i>		

## Disposition

Disposition Date: 11/30/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: PRUD-126396431 State: Arkansas

Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179

Company Tracking Number: IFSA-PICA-ARRM-JW

TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other

Product Name: AR Replacement Memorandum

Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Cover Letter		Yes
Form	Replacement Memorandum		Yes

SERFF Tracking Number: PRUD-126396431 State: Arkansas

Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179

Company Tracking Number: IFSA-PICA-ARRM-JW

TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other

Product Name: AR Replacement Memorandum

Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

## Form Schedule

Lead Form Number: P-ARRM(1/10)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	P-ARRM(1/10)	Other	Replacement Memorandum	Initial			P-ARRM(1-10).pdf



# Prudential

The Prudential Insurance Company of America  
Pruco Life Insurance Company

Annuity Service Center  
P.O. Box 7960, Philadelphia, PA 19176  
Telephone 1-888-778-5471  
E-Business Fax 1-215-658-5345  
Fax 1-877-778-2329

## Arkansas Life Insurance and Annuities Replacement Memorandum

### EXISTING CONTRACT/POLICY

Owner/Annuitant(s) \_\_\_\_\_

Insurer \_\_\_\_\_

Contract Number \_\_\_\_\_

Product Type\* \_\_\_\_\_

Product Name \_\_\_\_\_

### PROPOSED CONTRACT

Owner/Annuitant(s) \_\_\_\_\_

Insurer \_\_\_\_\_

Product Type\* \_\_\_\_\_

Product Name \_\_\_\_\_

*\*Deferred Fixed Annuity, Deferred Variable Annuity, Deferred Indexed Fixed Annuity, Immediate Annuity, Indexed Life Insurance, Variable Life Insurance, Whole Life Insurance, Universal Life Insurance, Term Life Insurance and Endowment.*

### Complete all that is applicable

Contract or Policy Provision	Existing Contract/Policy	Replacement Contract
Current Proposed Premium/Annual Consideration	Provide annual Life or Annuity Premium/Consideration if applicable \$ _____	Initial Consideration \$ _____ Subsequent Annual Considerations if appropriate \$ _____
Current Contract Value	If Annuity \$ _____ If Life Policy \$ _____	If not equal to value of existing contract or policy, please explain below: _____
Current Surrender Value	\$ _____ as of date _____	Please see prospectus for explanation of this value (Buyer's Guide and/or Disclosure Statement for a fixed product)
Death Benefit Amount	\$ _____ as of date _____	Please select death benefit to be applied for (applicable to variable contracts only): <input type="checkbox"/> Basic Death Benefit <input type="checkbox"/> Optional Death Benefit; specify below _____  Please see prospectus for explanation of death benefit choices



<p>Current Interest Rate and Guarantee Period (applicable only to Fixed products, Modified Guaranteed Annuity products and variable products with fixed investment options, including market value adjustment options)</p>	<p>Current Interest Rate _____ %  Guarantee Period _____</p>	<p>Current Interest Rate(s) _____ %  Guarantee Period(s) elected _____</p> <p>Please see prospectus for Fixed Investment Options/MVA Options (if any) available with this contract (Buyer's Guide and/or Disclosure Statement for a fixed product).</p>
<p>Guaranteed Minimum Interest Rate (GMIR) (applicable only to Fixed products, Modified Guaranteed Annuity products and variable products with fixed investment options, including market value adjustment options)</p>	<p>GMIR _____ %</p>	<p>GMIR _____ %</p>
<ul style="list-style-type: none"> <li>• Surrender Charge Period in Years</li> <li>• Surrender Charge % Per Year</li> <li>• Years Remaining</li> </ul>	<p>Number of years _____  % per year _____  Years remaining _____ years</p>	<p>Number of years _____  % per year _____</p> <p>Please see prospectus for a more detailed explanation of Surrender Charges and how they operate (Buyer's Guide and/or Disclosure Statement for a fixed product)</p>
<p>Are free withdrawals available?  If yes, what percentage  List Options</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><input type="checkbox"/> Yes   <input type="checkbox"/> No  _____ %</p> <p><input type="checkbox"/> Percentage of Consideration or Contract Value</p> <p><input type="checkbox"/> Terminal Illness</p> <p><input type="checkbox"/> Nursing Home Confinement</p> <p><input type="checkbox"/> Other</p>	<p><input type="checkbox"/> Yes   <input type="checkbox"/> No Annual free withdrawal  _____ %</p> <p><input type="checkbox"/> Percentage of Consideration or Contract Value</p> <p><input type="checkbox"/> Terminal Illness</p> <p><input type="checkbox"/> Nursing Home Confinement</p> <p><input type="checkbox"/> Other</p>
<p>Other Significant Policy or Contract Provisions</p>	<p><input type="checkbox"/> GMAB</p> <p><input type="checkbox"/> GMWB</p> <p><input type="checkbox"/> Other (please explain)</p> <p>_____</p>	<p>Living Benefits Applicable to variable annuity contracts only</p> <p><input type="checkbox"/> Please check if living benefit elected. List specific benefit below</p> <p>_____</p> <p>Please see the prospectus for a more detailed explanation of the above living benefit description.</p>

Initial Bonus/Credit Percentage or Amount	<input type="checkbox"/> Yes <input type="checkbox"/> No If checked Yes, please provide: % _____ or Amount _____	<input type="checkbox"/> Yes <input type="checkbox"/> No If checked Yes, please provide: Bonus/Credit Percentage _____%
Potential Loss of Bonus/Credit if Annuity is Exchanged, Surrendered or Funds Withdrawn	<input type="checkbox"/> Yes <input type="checkbox"/> No	The annuity contract may be subject to a loss of bonus/credit if it is replaced, surrendered, or funds are withdrawn. Please see the prospectus for an explanation of the treatment of credit/bonus amounts. (Buyer's Guide and/or Disclosure Statement for a fixed product)
Sub-Account Choices (applicable to Variable contracts only)	Current Sub-Account Choices _____ _____ _____ _____ _____ _____ _____ _____ _____	Please see the application or Allocation Instruction Form as applicable, and prospectus for sub-account choices, objectives and expenses associated with this annuity contract.
Guaranteed Purchase/Settlement Options	<input type="checkbox"/> Yes <input type="checkbox"/> No If known, please indicate below _____	Please see the prospectus for an explanation of guaranteed settlement options when you annuitize your contract (Buyer's Guide and/or Disclosure Statement for a fixed product).

I have received a copy of this completed form.

\_\_\_\_\_/\_\_\_\_\_  
 Owner/Annuitant Date

\_\_\_\_\_/\_\_\_\_\_  
 Joint Owner/Annuitant Date

I certify that the above provisions, and any other significant provisions, of the existing policy or contract and the proposed contract were discussed with the applicant(s)

\_\_\_\_\_/\_\_\_\_\_  
 Financial Professional Signature Date

# **Instructions to Complete Arkansas Life Insurance and Annuities Replacement Memorandum**

## **General Contract/Policy Information**

- **Owner/Annuitant(s)** – Enter the primary owner's/annuitant's first and last name for both the existing and proposed contract/policy
- **Insurer** – Name of the insurer for the existing and proposed contract/policy
- **Contract Number** – Contract/Policy number of the existing and proposed contract/policy
- **Product Type** – Refer to options listed directly below this section on the form
- **Product Name** – Indicate product name for existing contract/policy and proposed contract

## **Contract/Policy Provision Comparison Information**

- **Current Proposed Premium/Annual Consideration**
  - o Existing Contract/Policy – Provide the annual premium/annual payments to the existing policy/contract if applicable
  - o Proposed Annuity Contract – Indicate estimated initial consideration and subsequent annual considerations if applicable
- **Current Contract**
  - o Existing Contract/Policy – Provide current contract/policy value
  - o Proposed Annuity Contract – Please explain if not equal to value of existing contract/policy
- **Current Surrender Value**
  - o Existing Contract/Policy – Provide current surrender value of existing contract/policy. Surrender Value amount generally includes amount to be surrendered less withdrawal charges and other fees assessed at time of withdrawal.
  - o Proposed Annuity Contract – This is addressed in the prospectus and should be reviewed with the client (Buyer's Guide and/or Disclosure Statement for a fixed product)
- **Death Benefit Amount**
  - o Existing Contract/Policy - Provide the value of the death benefit for the existing contract and the "as of" date
  - o Proposed Annuity Contract – Provide the death benefit option to be elected on the proposed contract. The death benefit options are explained in the prospectus and should be reviewed with the client
- **Current Interest Rate & Guarantee Period**
  - o Existing Contract/Policy - Provide the current annual fixed (or MVA) interest rate on the existing contract (or fixed/MVA investment option if a variable contract) and the remaining period of time for which that rate is guaranteed, if applicable.
  - o Proposed Annuity Contract - Provide the new money fixed or market value adjustment interest rate for the proposed contract (or fixed/MVA option if a variable contract) and the period for which that rate will be guaranteed, if applicable.
- **Guaranteed Minimum Interest Rate**
  - o Existing Contract/Policy - Provide the minimum annual interest rate guaranteed by the existing contract (or fixed/MVA option in a variable contract).
  - o Proposed Annuity Contract - Provide the minimum interest rate guaranteed by the proposed contract (or fixed/MVA option in a variable contract).

- **Surrender Charge Period in Years/Surrender Charge Percentage Per Year/Years Remaining**
  - o Existing Contract/Policy – Provide the total number of years the existing contract or policy is subject to surrender charges, the surrender charge percentage per year and the number of years the contract is still subject to surrender charges.
  - o Proposed Annuity Contract – Provide surrender charge period and percentage for contract to be purchased. The prospectus language that discusses surrender charges should be reviewed with the client (Buyer's Guide and/or Disclosure Statement for a fixed product).
- **Are free withdrawals available? If yes, what percentage?**
  - o Existing Contract/Policy – Indicate whether existing contract has a free withdrawal provision. If yes, indicate percentage and that it is based on Consideration or Contract Value. In addition, check and/or write in any other circumstances where a waiver may be applicable (e.g., terminal illness riders, nursing home riders, etc.)
  - o Proposed Annuity Contract - Indicate whether existing contract has an annual free withdrawal provision. If yes, indicate annual percentage and if it is based on consideration or contract value. In addition, list out any other circumstances where a waiver may be applicable (e.g., terminal illness riders, nursing home riders, etc.)
- **Other Significant Policy or Contract Provisions**
  - o Existing Contract/Policy – Check existing contract/policy benefits. If other, list the type of benefit(s).
  - o Proposed Annuity Contract – Indicate whether any living or accumulation benefit will be elected on the proposed contract.
- **Initial Bonus Percentage or Amount**
  - o Existing Contract/Policy – Indicate whether a bonus was to applied to the existing contract/policy. If yes, indicate percentage or dollar amount.
  - o Proposed Annuity Contract - Indicate whether a bonus will be applied to the proposed contract. If yes, indicate percentage.
- **Potential Loss of Bonus if Annuity is Exchanged, Surrendered or Funds Withdrawn**
  - o Existing Contract/Policy – Indicate whether a loss of bonus will occur if the annuity is exchanged, surrendered or funds withdrawn.
  - o Proposed Annuity Contract – If there is a potential loss of bonus if proposed annuity is exchanged, surrendered or funds are withdrawn, please review such provisions in the prospectus with the client (Buyer's Guide and/or Disclosure Statement for a fixed product).
- **Sub-Account Choices (applicable to Variable contracts only)**
  - o Existing Contract/Policy – List all current Sub-Account allocations
  - o Proposed Annuity Contract – These will be listed on the Allocation Instruction Form or application (if applicable) and are covered in detail in the Prospectus.
- **Guaranteed Purchase/Settlement Options**
  - o Existing Contract/Policy – Indicate whether the existing contract/policy has any guaranteed settlement options and if so, list the guarantee(s)
  - o Proposed Annuity Contract – Ensure the client is aware of any guaranteed settlement options and refer client to prospectus, if applicable, for more information (Buyer's Guide and/or Disclosure Statement for a fixed product).
- **Signatures**
  - o The proposed owner and if applicable, joint owner, is required to sign and date the form.
  - o The Financial Professional is required to sign and date the form.
  - o A copy of the completed form must be left with the client.
  - o A copy of the completed form must be submitted with the new business paperwork.

SERFF Tracking Number: PRUD-126396431 State: Arkansas  
 Filing Company: The Prudential Insurance Company of America State Tracking Number: 44179  
 Company Tracking Number: IFSA-PICA-ARRM-JW  
 TOI: A10 Annuities - Other Sub-TOI: A10.000 Annuities - Other  
 Product Name: AR Replacement Memorandum  
 Project Name/Number: AR Replacement Memorandum/AR Replacement Memorandum

## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification <b>Bypass Reason:</b> Not applicable. <b>Comments:</b>		
	Item Status:	Status Date:
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> Not applicable. <b>Comments:</b>		
	Item Status:	Status Date:
<b>Bypassed - Item:</b> Life & Annuity - Acturial Memo <b>Bypass Reason:</b> Not applicable. <b>Comments:</b>		
	Item Status:	Status Date:
<b>Satisfied - Item:</b> Cover Letter <b>Comments:</b> <b>Attachment:</b> PICA Only Cover Letter.pdf		



**Prudential Annuities**  
A Business of Prudential Financial, Inc.  
1 Corporate Dr  
Shelton, CT 06484  
(800) 752-6342

**VIA: SERFF**

November 24, 2009

Honorable Jay Bradford, Insurance Commissioner  
Life and Health Division  
Arkansas Insurance Department  
200 West Third Street  
Little Rock, AR 72201

Attn Claudia Meeks, Rates and Form Filings

Re: The Prudential Insurance Company of America ("PICA, we, us")  
NAIC No. 304-68241, FEIN No. 22-1211670

Forms Submitted for Approval:  
Replacement Memorandum Form, P-ARRM(1/10)

Dear Ms. Meeks:

PICA submits for your approval a Replacement Memorandum similar to the sample Memorandum contained in Department Rule 97 dated July 23, 2009. We would appreciate the Department's expedited review of the submitted form so that we may comply with the January 1, 2010 effective date of Rule 97.

Brackets have been placed around the contact information for the service center which is subject to change from time to time. We reserve the right to update the contact information without re-filing.

Please note that the identical form is being filed simultaneously on behalf of Pruco Life Insurance Company and The Prudential Insurance Company of America.

PICA believes that federal law exempts these forms from any "Flesch score" or readability requirements in your statutes or regulations. Unless otherwise informed, PICA reserves the right to alter the pagination, layout, including sequential order, color, and typeface of these forms. PICA confirms any such change will be in conformance with your State's filing requirements. Any filing materials PICA believes your Department requires are enclosed. Please contact the undersigned with any questions you may have.

Very truly yours,

A handwritten signature in black ink that reads "John Witteman".

John Witteman  
Contract Specialist  
Tel: (800) 628-6039, Ext. 21403  
E-mail: John.Witteman@Prudential.com  
Fax: (203) 944-7737  
Enclosures